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THE USE OF THE MICROSCOPE IN THE PRACTICE OF MEDICINE.

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FOR the last nine or ten years the pathologists of Europe have been in the habit of using the microscope for the elucidation of many departments of practical medicine, but more especially for the examination of urinary diseases.

The researches of Prout and others, who examined this difficult subject with the assistance of chemistry, did much, no doubt, towards removing a great deal of the obscurity in which it was enveloped; but the physician in the active practice of his profession, although he could not shut his eyes to the great importance of chemistry, in renal diseases, had to neglect the minute study of these affections, inasmuch, as at every step his progress was arrested by the necessity for chemical analysis, and the great length of time which a careful examination of the urine required, when conducted in this manner. But now that the writings of Rayer, Bird and Simon, have placed in the hands of the practitioner a speedy and simple method of analyzing urinary deposits, no matter how small in quantity, by means of the microscope, no excuse can be offered for his remaining ignorant of this subject, except that which, with equal propriety, he might adduce for his want of acquaintance with other improvements in medicine, viz., indolence or indifference.

But I am not without hope, that the recital of the following cases, in illustration of the value of the microscope to the medical practitioner, will be productive of good; and that some of my brethren, who may not as yet have turned their attention to this important matter, will be induced to commence its study, which, I can assure them, will be productive of more unalloyed pleasure than any other department of their profession is capable of affording.

For some years back I have been in the almost daily habit of using this instrument, in the investigation of diseases of the kidneys, urethra and bladder, and in those affections which, though situated in distant organs, produce sympathetic derangements of the renal functions.

On my arrival in this city, I made some of my friends acquainted with these investigations; amongst others, I may allude to Dr. Crawford, whose zeal for the science of his profession is well worthy of imitation. He soon saw the great assistance the instrument afforded in many difficult cases, and availed himself of his being in London to order out two excellent ones, which I believe he is constantly employing.

Indeed I could hardly adduce a case more conclusive of its utility than the following, which occurred in his practice.

CASE I.—A boy, aged about 6 or 7 years, was brought to Dr. Crawford last autumn, by his mother, who stated that he labored under various symptoms, which led Dr. C. to suspect the presence of a calculus in the bladder. He accordingly introduced a sound, but did not obtain any conclusive evidence of the presence of a stone. The boy labored under the symptoms for some time longer, and in my presence the sound was again introduced, but neither the doctor nor myself could feel any calculus. I obtained a small quantity of the boy's urine, and examined it with the microscope, and although to the naked eye it appeared quite healthy, yet it exhibited a good number of pus globules, as well as a deposit of the triple phosphate in prismatic crystals.

As the boy had no symptoms of disease of the kidneys, or ureters, and his age precluding the probability of these appearances being due to gonorrhœal irritation, the opinion we formed was, that the mucous membrane of the bladder was in a state of subacute inflammation. Soon after the employment of treatment which this diagnosis suggested, the symptoms became alleviated.

II.—Last winter a gentleman, aged 24, called upon me for advice, for what he termed a disease of the liver. He had been under the care of one physician for three years, and had lately consulted a second—the former had given him large quantities of mercury for the supposed malady, and the latter, following up the idea, had given him blue pill and taraxicum. Both had attributed all his symptoms to "liver disease." On investigating the case I could not agree with him, that his headache, palpitations of the heart, loss of appetite, constipation, lassitude, apathy for former occupations and amusements, extreme nervousness and timidity, inability to take exercise or undergo the least fatigue, indifference to worldly prospects (seeing that he had been only a month married), occasional dizziness of sight and impairment of memory, with almost constant insomnia, and a host of other minor symptoms, were to be ascribed to chronic hepatitis. Accordingly I recommended him to leave at my house four or six ounces of the urine passed on the following morning.

Having examined it, I found it loaded with oxalate of lime crystals, and a copious admixture of dead and disorganized spermatozoa. I immediately obtained a clue to the diagnosis and treatment of his disease. The presence of spermatozoa clearly proved the existence of that form of spermatorrhœa, to which Lallemand has directed attention. In this variety, the discharge takes a retrograde route to the bladder, hardly any of it getting exit by the urethra; and such a condition of the genital organs is more frequently produced by onanism than natural indulgence. The oxalate of lime always indicates great debility and irritation of the system—general nervous exhaustion; and we know that to such a state it is that the unfortunate victim of this practice reduces himself.

I had no hesitation, then, in the absence of symptoms more clearly connected with hepatic disease, in associating all his sufferings with the above-mentioned vice.

Now, it is extremely unlikely, that I should so soon have been enabled to arrive at the origin of the disease, were it not for the light thrown upon the matter by the microscope; but having once detected spermatozoa in the urine, the inference to be deduced was, that the involuntary emissions were the result, either of excessive sexual indulgence or masturbation; and the confessions of the patient removed any further difficulty. During the whole time that he was treated for the supposed liver disease, he himself more than suspected that his physicians had not traced his ailments to the fountain head; and he expressed his astonishment, that during the whole time he was under their treatment, they had never inquired into his mode of life or habits. Suffice it to say, that after some hesitation, he admitted having been inordinately addicted to the practice, and stated that for the last three years he had been subject to involuntary emissions three or four times each night; that the consequent exhaustion was so great, that for a length of time he was accustomed to go to bed at ten o'clock, and rising again at twelve o'clock, he passed the next three or four hours in walking about his chamber, or in reading, in order to allow the interval to be passed over without involuntary emissions. Latterly, he had become impotent, and being recently married, his wretched condition preyed severely on his mind.

The treatment pursued was ultimately attended with success, and he now enjoys good health.

I have selected the above example from amongst many others, in which I have diagnosed involuntary seminal discharges from the microscopical examination of the urine, a discovery first published by the celebrated Lallemand, who has contributed so much to our knowledge of the pathology of the genital and urinary apparatus.

III.—I was consulted in March last by a lady, in reference to the case of her son, a boy aged 8, of strumous habit, who from infancy had been subject to "wetting the bed" every night, no matter what precaution she adopted to prevent it. For the first three years this habit caused her no uneasiness, as she thought that as the child grew older, the habit would wear off; but at the expiration of this period, not finding any amendment taking place, she consulted her physician, who recommended a "whipping" to be administered every morning, a prescription which for some time she rigidly followed. Not deriving any benefit from this scientific treatment, she left the case to nature, until she brought him to me. Having made an examination of the urine, it was found to present the following characters—spec. grav. 1021 at temp. 65 deg. Fahr.; reddened litmus paper, was of a deep amber color, depositing a yellowish sediment, which, on being examined microscopically, presented a copious collection of large-sized, lozenge-shaped crystals of lithic acid, without any admixture of epithelium, pus, or blood. In other respects the boy's health, though not bad, was far from being robust. In fact, he was what is usually understood by the term, a "delicate boy."

The treatment I pursued in this case, is that which, under similar circumstances, I find to answer best, viz., a combination of diaphoretics, antispasmodics, alkalies and nutritious diet. Accordingly, a powder of

nitrate of potash was ordered to be taken at bed-time, and washed down by a draught containing camphor mixture, and tincture of opium; lime water to be taken during the day, and nutritious diet, consisting of a good proportion of *fresh* animal food.

Nitrate of potash acts in these cases most beneficially, not only in keeping the skin in a healthy state, but also by increasing the watery constituents of the urine, thereby diluting it, and rendering it less irritating to the bladder. The camphor and opium are serviceable in preventing spasmodic contraction of the bladder, and in subduing irritation.

The indications for alkalis are so manifest, that no explanation is required for their having been ordered. Of these I have derived most benefit from lime water taken with equal parts of milk, and used, not as a medicine, but as the ordinary drink of the patient. Most invalids become very fond of it, after the three or four first days.

It may appear unscientific to order animal food, in the lithic acid diathesis, seeing that we thus supply the system with nitrogenized elements, and consequently with materials for the formation of urea; yet the harm we do is more than compensated for, by the benefit to the system generally; for though, in a chemical point of view, we ought to withhold azotized substances in the uric acid diathesis, yet pathology has shown that we must first relieve the debilitated and irritable state of the system, in such cases, before we can look for a *permanent* improvement in the renal secretion.

A perseverance in the above treatment was completely successful; on the third night of treatment, for the first time in his life, he avoided wetting the bed, and on the 2d of April the urine was 1021 in spec. grav.; it reddened litmus paper slightly, and deposited triple phosphate in considerable quantity. Dr. Charles Campbell was present at this analysis of the boy's urine. From this time forward, his general health greatly improved, and the power of retaining his urine continues unimpaired.

IV.—A gentleman of great intellectual attainments consulted me, when practising in Dublin, under the following circumstances. He and a friend had gone on an excursion, during which they had indulged in claret and champagne, wines to which they were unaccustomed. My patient soon became affected with great and frequent desire to make water, accompanied with pain over the region of the pubis; but these symptoms were not productive of much annoyance, nor did they excite much alarm, for, it being hot weather, he also drank freely of cooling beverages, and attributed the frequent micturition to this cause. The symptoms not disappearing on his return to his ordinary mode of life, he was induced to consult me. I found him in rude health; every function performed with regularity; the urine voided in my presence appeared perfectly healthy; the slight trace of opacity produced by adding nitric acid was so trifling that I attached but little importance to it; it was also alkaline, and of high specific gravity. On examining it with the microscope, pus globules were discovered. I now ordered him to save for me the urine passed next morning, and on examining it, I was really surprised at the quantity of pus globules it contained. As there was no evidence of dis-

ease of the kidneys, ureters, or urethra, I treated him for chronic cystitis, and with success. The microscope was of the greatest assistance in the diagnosis, but it was infinitely more useful in the latter stages of the disease, for I was induced, by the evidence it afforded, to persevere in my treatment, long after the urine ceased to throw down a deposit perceptible to the naked eye; and I have no doubt that without its aid I should have left off the remedies long before the disease was completely eradicated.

V.—Some months ago I was requested by Dr. George Campbell to allow him to examine with my microscope the urine of a young gentleman, who labored under symptoms of stone, and in whose bladder Dr. C. had distinctly felt a small calculus some time previously.

It appeared that though the patient had voided the urine through the urethra, yet the symptoms of calculus still remained, and the urine continued to throw down a copious deposit, and retained its highly acid qualities. On placing a drop of it under the microscope, the sediment was found to be composed of immense lozenge-shaped crystals of lithic acid. Dr. C. informs me, that notwithstanding the employment of measures to correct the formation of uric acid, and to improve the general health, the young gentleman still labors under many of the symptoms for which he was consulted; and from what I have heard of his case, I coincide with Dr. C. that it will be extremely difficult to prevent the formation of a stone. Though the employment of the microscope has not led to as satisfactory results in this case as in the others, yet its extreme value in clearing up the diagnosis cannot be questioned. Indeed Dr. C. was himself so convinced of its importance in practice, that he immediately determined to procure one for his own use.

VI.—A strong healthy man, aged 30, who had been under the care of my colleague, Dr. Hall, in the Montreal General Hospital, for gonorrhœa, and was discharged cured of the complaint, came to me about a month after his dismissal from hospital, complaining of frequent desire to make water, and of pain and difficulty in doing so. As there was no discharge whatever from the urethra, I thought it advisable to pass a catheter, and not meeting with any obstruction, I collected the urine drawn off by it, and examined it at the moment. It was slightly acid, spec. grav. 1024, at temp. 72° Fahr., coagulated on addition of nitric acid, and yielded an abundant exhibition of pus globules on examination with the microscope. Having no symptoms referable to disease of the kidneys, I treated him for cystitis, and with decided benefit at first, but as he had not a comfortable residence, and was obliged to walk a great distance to my house, in the late hot weather, I recommended him to enter the General Hospital under my care. Here I had frequent opportunities of directing the attention of the students to his case. The urine being again examined, exhibited not only a deposit of pus globules, but also of blood globules. Notwithstanding this unfavorable complication, he was discharged about five weeks after admission, perfectly cured.

In this case I injected nitrate of silver solution into the bladder; the quantity of pus immediately diminished, and after the third injection

completely disappeared. The microscope was of the greatest aid to me in every stage of this interesting case.

VII.—Through the kindness of my friend and former preceptor, Dr. Hutton, Surgeon to the Richmond Hospital, Dublin (whose grand discovery of the modern method of applying compression for the cure of aneurisms, places him in the highest rank amongst the surgeons of Europe), I was enabled to examine the urine of a little girl, from whom he had removed a mulberry calculus. Notwithstanding that the operation was most successful, the patient did not gain strength and flesh, in proportion to the expectations of her medical attendant. Having examined the urine, I found it still throwing down copious deposits of the oxalate of lime crystals, and a great quantity of epithelium. It was then quite clear, that though the calculus was removed, yet that the oxalate of lime diathesis was still present, and that until this peculiar state of the system was improved, no amendment of the general health could be expected. Attention to this circumstance soon substituted a lithic acid deposit for that of oxalate of lime, and this change was followed by the patient's restoration to health. Here the microscope not only led to an immediate change of treatment, but in all probability prevented the formation of a second mulberry calculus.

I could enumerate several other cases of urinary diseases, in which this instrument has afforded the greatest assistance in diagnosis; for I make use of it almost as frequently as I do of the stethoscope, where that instrument can be employed; and I have no hesitation in stating, that it is equally important in practice, more demonstrative in the phenomena it discloses, and, if possible, more agreeable in its study. It is not merely in the analysis of the urine that the microscope is of use to the practitioner, but likewise in the examination of all the other fluids poured out, both in health and disease. It is more readily employed than chemical analysis; for at one glance, we can tell the constituents of the smallest quantity of a fluid. We all know, that we sometimes meet with diseased secretions, the true nature and composition of which, we should much wish to ascertain; and it not unfrequently happens, that those products occur in such small quantities, as to prevent an accurate chemical analysis being made. But this objection cannot be urged against the microscope, for a drop, nay, a quarter of a drop, is quite sufficient for our purpose.

The chemist having once made his experiment with a fluid, has done with it, he cannot repeat it, nor can he demonstrate the changes that have taken place in the same substances a second time. Not so with the microscopist; he can examine the same drop with powers varying from the lowest to the highest range, and with different intensities and varieties of light and shade.—*British American (Montreal) Journal of Medical Science.*

CASE OF DESTITUTION OF MORAL FEELINGS.

By Eliza W. Farnham, Matron of the Mt. Pleasant State Prison, Sing Sing, N. Y.

J. S., a colored girl, about 18 years of age, was convicted at the Oswego Circuit, in 1843, of arson in the third degree, and sentenced to this prison for the term of two and a half years. About six months of this sentence had expired, when I took charge of the prison, April, 1844.

Her anomalous character soon attracted my attention, and I found her properly classed with some eight or ten others as eminent for disorder and violence. Her name was on the tongue of both officers and convicts. The former spoke of her as one of those incorrigibles who were then keeping the institution in perpetual disorder; while the latter generally spoke of her with execrations, and sometimes with a fretful and impatient sort of pity.

On all hands I was informed that she was unconquerable; that she not unfrequently banished rest and quiet from the prison for 24 to 48 hours together; that her devices were inexhaustible—her perseverance unflagging—and her endurance incredible. When, therefore, it became my duty to take the government of her seriously in hand, I felt the necessity of seizing upon the first development of the mischievous disposition, to make, if possible, an impression upon her mind of a distinct and influencing character. I did not wait long for an opportunity, for notwithstanding the most vigilant attention, and the greatest patience on the part of the lady having immediate charge of her, she was reported to me as having wantonly violated one of our most wholesome regulations.

Having taken her to my office, I spoke to her plainly and thoroughly of the natural tendencies of her mind—the results to which, if indulged, they would lead—the practicability of restraining them—that the design of her imprisonment was to teach her the *necessity* of this self-control—that I would explain to her then and at other times the *methods* of doing this, and otherwise aid her to this end, as her wishes and need might require. In short, I presented to her as striking a view of herself, and the destruction to which her course was tending, as I was able to do, and strove to impress her with the sincere sympathy and kind solicitude which I felt for her, and my hope that she might succeed in restraining herself so as yet to be useful and happy.

To these thoughts and feelings she seemed partially to respond; and indeed went to her room weeping, and protesting that she would on no account do wrong to one who treated her kindly—and that she would do her utmost to control her temper and love of mischief.

In a few days, however, she was reported again, for an offence trivial in itself but committed in such a manner as to manifest a determined disposition to set the laws of the prison at defiance. Resolved to make a thorough experiment upon her, I again took her apart, and admonished her kindly as before, and urged the fact that if such means as these did not induce a reformation, she would ultimately compel me to adopt severe measures for the correction of her offences. I observed that the impression made by this second interview was much weaker than that produced

by the first; and began to suspect, what finally occurred, that I should be forced to adopt harsher measures and appeal to her fears before I should succeed in laying any restraint upon her propensity to misrule.

One evening, soon after this, accordingly, I was requested to go into the prison to attend to her again. It was near 9 o'clock, and she was making a great noise, disturbing the quiet and comfort of all the inmates. I caused her to be taken to the outer ward, and when there inquired the reason of her conduct. She replied that she was suffering from the toothache and could not keep still. Suspecting that she feigned this excuse, I desired her to show me the tooth affected. Whereupon she laughed, concealing her face, and writhing to contortion her whole person. She was very reluctant to do what I desired, and did not until twice commanded imperatively. She then opened her mouth, which she said was painful. It was entirely sound, as were all her teeth free from spot or defect of any kind, as well as from all nervous excitation. I however gravely asked her how long it had ached; and she again concealed her face and evidently enjoyed a hearty laugh. At length, however, she replied that it began to ache after going to her room.

Having detained her about ten minutes with these and like inquiries, I told her that having, without apparent effort, been comfortable and quiet that length of time, I did not doubt her ability to continue so after she should go to her cell, that I knew her tooth did not ache, and that at the first outcry, after entering her cell, I should take immediate measures to procure silence. After representing to her the extreme cruelty of keeping her fellow prisoners awake, and that if I should resort to severe measures to prevent it, she would be indebted to herself alone for the sufferings which might ensue, I sent her away, and returned to my rooms. A few minutes afterwards, however, she again broke out into the most frightful howlings and imprecations; and returning, I had the gag and straight jacket applied. These were not completely effective. The gag in particular was somewhat defective, and allowed her to articulate some words even, and by no means prevented from uttering her diabolical yells. Soon she succeeded in stripping herself of both, and became more noisy and fiendish than ever, and thus the night passed, she making incredible efforts to be troublesome, and everybody else in the building annoyed and surprised at her mischief and malignity.

The next morning she was less noisy, but far from being as silent and decorous as the rules and comfort of the prison required. I therefore directed her to be put on bread and water until I should deem a change advisable. And thus fed I retained her in solitary confinement twenty-one days. At the end of this time she was permitted to take her cell again and her seat among her fellow-prisoners. But scarcely four weeks had passed before a similar scene was enacted, and followed by ten days solitary confinement. As before, so now, she was visited daily and conversed with in regard to her conduct in every manner most likely to persuade her to a better course. But she had been released only eight or ten days when she again became refractory, and was again plied with the straight jacket and gag.

On this occasion I had procured a straight jacket of improved construction ; and yet she succeeded in escaping from it, and it seemed a mystery to me how this was done ; and I had it more firmly replaced, and laying her prostrate upon her wooden bedstead had a cord wound around it, and herself from head to foot, and tightly fastened. This was done by a strong, able-bodied man, and I thought skilfully done ; and yet she freed herself from these restraints in little time. Again the gag and jacket were put on, and she lashed down to her bunk as before. I now determined to have the progress of her next effort at victory witnessed. It appeared that she was no sooner left than she commenced a series of *serpent-like* contortions, and continued them until she had wound herself quite out of the ropes, and released herself from the gag and jacket. I was the more struck with this statement, as I myself had noticed in all her movements, actions or marked resemblance to those of that reptile. Her skin also was spotted like a common species of snake, and her pulse, even in health, was so small as scarcely to be perceptible, and her flesh cold.

These facts in her physiology, I ought to add, were so distinctly marked as to strike the attention of every one acquainted with her ; so much as to be a subject of frequent comment among her fellow prisoners ; and were always recognized by the officers of the institution.

Her powers of endurance passed belief. On the occasion last referred to, we succeeded, after several trials, in securing her in such manner that despite her struggles, the gag and jacket were kept on thirty-six consecutive hours ; and this without food, and after nearly twenty-four hours of previous confinement and such violent efforts to extricate herself as I have described, and notwithstanding repeated proffers to liberate her if she would submit.

During this siege, and before her submission, I was not a little disheartened and at a loss what next to do. The prison furnished no proper facilities for treating such a case. I had at that time no ward detached from the main building where I could confine her ; no way, in short, to procure submission, but by a straight-forward contest, in which, thus far, she had the most decided advantage, and seemed almost miraculously endowed to persevere in it.

At the end of the time last named, she had again by her remarkable efforts freed herself, but was far from being either exhausted or subdued. For no sooner had she laid aside the jacket and gag, than she recommenced the noise apparently as fresh as at first. Painful as it was, therefore, I had no recourse but to replace the instruments of restraint, and about thirty hours more were spent by her in that condition ; she now appeared somewhat fatigued—not exhausted—but a little softened. I therefore took off the jacket and gag, and kept her still in a dark cell ten days on a diet of mere bread and water. She was then removed to the outer ward, which was then fortunately completed, and there kept about three months, most of the time on the bread and water diet.

For the first time she now exhibited something like a subdued spirit. Long confinement and abstinence had reduced her physical energies ; and she came out comparatively tame. I never again had occasion to

resort to anything but solitary confinement. Into this she would go quietly, and remain silent enough to escape more rigorous measures. But more than half the remainder of her term was spent in solitary confinement. When let out she would go on tolerably awhile—but with continually increasing difficulty, until I would be compelled again to seclude her from her companions. Her perversity, in fact, never flagged, and her physical endurance and wilfulness were never subdued—her fiendishness never checked, even, with anything like an abiding, controlling restraint for a single day during the years that she remained under my charge, and although moral suasion which it was in our power to reach, was sedulously used in her behalf, yet when she left her lonely cell for the world again, I fully believe that her whole nature was as obdurate as possible. Apparently a spiteful snake in human form! In truth, with many of the characteristics of a cold-blooded animal—such as torpid circulation, cold surface, &c., she was also utterly restless. She never seemed to require or enjoy repose. And yet, though capable of the highest degree of physical action, and apparently supplied with a really wonderful amount of nervous stimulant, such was her love of mischief that she would manage by false motions to accomplish less in a day than some others of half her powers did in half that time.

She was a most wonderful liar in word as well as deed. In the former she was if possible more artistical than in the latter. The most astonishing fabrications were the spontaneous product of her mind. They were put together in such a manner, and made to bear such a relation to known circumstances, and related with such gravity and form, that those who heard them could scarcely do less than give them credence.

With all this perverseness, she possessed quick perceptions, good reflective capacity, and a large share of ideality, marvellousness and imitation. She was wholly uneducated, not even knowing the alphabet. She had much love of paintings and drawings, and sketched with spirit, taste, and considerable correctness. But no human kindness had she; nothing human, indeed, but her form—an idiosyncrasy of her race.

From all the study which I was able to bestow on her case, I became clearly convinced that by far the greater portion of her violence and resistance was irresistible, a species of insanity, indeed, arising from some congenital cause. Whether the very striking physical peculiarities which I have named were any indication of this, I leave for others to determine. I may add, that she left the prison on the first of April last, friendless and destitute, except of the small pittance with which the law permitted her to be furnished. A lamentable case, and one of many illustrating the inhumanity and indifference of the law to the welfare of those who fall under its penalties.—*American Journal of Insanity.*

TYPHOID FEVER.

In a Letter from Cincinnati, by Daniel Drake, M.D.

I HAVE lately assisted in the *post-mortem* examination of two patients who died after several weeks of illness, with symptoms answering very

well to Louis's description of typhoid fever, and *not* answering to the symptoms which characterize the typhus fevers which I formerly saw prevailing here. Both the patients were men in the earlier periods of middle life, and both were "new comers" here; reminding one of the class of patients in the practice of Louis. In one, the inflammation of the glands of Peyer extended along the lower five feet of the ileum, and for half that distance towards the cæcum they were in a state of ulceration. The lowest four inches of the small bowels presented ulceration of the intervening mucous membrane as well as of the elliptical patches, and the parietes of the tube were greatly thickened. In the other case, this thickening did not take place, and the consequence was the sudden death of the patient, after the fever had nearly ceased and he seemed to be convalescent. His physician, one of my friends, left him in the evening with a pulse at 72, but soon after reaching home was recalled. The patient had been suddenly seized with extreme pain just above the symphysis pubis. As yet his pulse was not much affected, but by morning it had become small, weak, and frequent, and his skin was covered with a clammy sweat. I saw him in the afternoon, when his abdomen was slightly tympanitic, his pulse thready, his countenance Hippocratic, and he was ejecting fluids from his stomach, by a kind of hiccup, or paroxysmal regurgitation, precisely similar to that which brings up the fatal black vomit of yellow fever. At two o'clock the next morning he expired. On opening the abdomen, a quantity of serum and lymph, colored with feculent matter, was found in the right iliac region and pelvis. The omentum was engorged and cemented to the intestines, which were covered with soft membraniform lymph. On further examination we found a circular perforation of the ileum, large enough to receive the quill with which I am writing, about two feet above the ilio-cæcal valve. It had occurred in the centre of an ulcerated elliptical plate, and not the least effort had been made by the *vis medicatrix* to thicken or sustain the peritoneum, at that point. It did not even present any hyperæmia. A number of the glands of Peyer were inflamed, and several of them ulcerated; but the lesions were not of such extent but that the patient might have recovered, had not the perforation led to a suddenly fatal peritonitis. It is worthy of record, that the attending and consulting physicians of this patient, both highly intelligent and respectable members of the profession, suspecting, from the general symptoms, an affection of the glands of the ileum, had made repeated examination of the ilio-cæcal region, and the patient always answered that there was neither pain nor tenderness. It is also deserving of record that in our *post-mortem* examination of the other patient, in whom so much ulceration existed, extending, as I may here add, into the cæcum and colon, we found, in the intestines, the usual quantity of healthy feces. The two facts taken together show, that absence of pain and soreness under pressure and the presence of healthy alvine discharges, may coexist with fatal lesion of the glands of Peyer; and that the diagnosis of such cases is, therefore, of a very doubtful and uncertain kind. How many other cases of the same sort with these have occurred in the "Queen City" this summer, I cannot say;

but from what I have heard, I suppose there have been several. Indeed, just before the death of these patients, I was called into consultation, by one of our most promising young physicians, over a gentleman of nearly the same age with the other two, who had manifest symptoms of an acute *typhoid* fever, with decided, even peritoneal affection of the right iliac region. The early loss of fifty ounces of blood, which was buffy, arrested the disease. This fever I suppose to be of the same kind with that which has prevailed, more or less, for several years past in the interior and oldest settled parts of Kentucky; and may be among our *increasing* diseases. If so, it is entitled to great attention; just as an invading army should be more vigilantly watched than one which is retreating. If, with the "progress of years," typhoid fever should replace our autumnal remittents, we should not, I fancy, gain very much by the change. I wish it were possible (in a successful and pointed manner) to direct the attention of our readers upon this form of fever; and especially upon its connections with autumnal fever, which seems frequently to modify, and be modified by it. Can any one tell whether those cases of remittent bilious fever, which, in their latter stages, exhibit typhoid symptoms, are accompanied by lesions of the ileum?—*Western Medical Journal*.

DR. FAHNESTOCK'S "ARTIFICIAL SOMNAMBULISM."

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—Permit me to remonstrate against your giving publicity to such absurd and contemptible exhibitions of folly, as the late article of Dr. Fahnestock, of Lancaster, Pa., who, it seems, has turned miracle-monger, by embracing the broad farce of mesmerism, resigning his reason, and consenting to be the dupe of his delusions. Neither his former professional character (now that he has forfeited it), nor the complaisant endorsement of Dr. Lee, who chooses to become his sycophant, should warrant you in defacing the pages of your Journal, by allowing it to become the record of self-stultification by men who will very soon become ashamed of the frauds of which they are now the victims. There are periodicals open to the lying wonders of mesmerism, now surpassing in their monstrosity anything related by Baron Munchausen, or written in Gulliver's Travels! and all the devotees of the sect may therein write their own epitaph, and indulge their cacoëthes to surfeiting, while they continue to grope beneath the very error of the moon. But in the name of our degenerate and degraded profession, let not your Medical and Surgical Journal contribute to give even a "mortal immortality" to the divorce of science from common sense, for which so many of the fraternity are diligently laboring.

Your timely caveat demonstrates that you are not within the charmed circle, and hence you insert the article under protest, proffering to furnish the parties a multitude of similarly-attested mesmeric *facts*, equally true and wonderful, in the nightly repetitions of mountebanks, in Boston, for a York shilling, which is the fee of those who live by their wits without

money, by plundering their victims of both wits and money. But still I question the benevolence of allowing any man to write himself down an ass, in so respectable a Journal as yours, however he may be prompted to the self-sacrifice. His inonomania will not always last, and meanwhile his friends should be considerate of his infirmities, and protect him from himself.

It is not enough, it seems, that we are to believe in physical effects produced by metaphysical causes!—not enough that we should swallow the stories of the voluntary and involuntary suspension and resuscitation of vitality at the will of the magnetizer, by whose fiat the phenomena of life are withheld or imparted from the whole or any part of the human body at pleasure!—not enough that we should admit that innervation, and all the physiological functions of which it is the source, can be looked or touched into annihilation by the magic of mesmerism! but we are now called upon to believe that the decree of the Creator inflicting the pains and sorrows of child-birth has been and can be defeated at pleasure, either by the woman herself when instructed by Dr. F., or without her consent by the doctor's magic power. So that henceforth it shall no longer be true that "in sorrow shalt thou bring forth children," at least when Dr. F. or those equally versed in the mysteries of "the science" can be in attendance in the lying-in chamber!

One cannot help imagining that all this sublimated humbug has its origin in the doctrines taught by the celebrated and Reverend! Doctor! Dods!! that "God is electricity, and electricity is God!" Such is the impiety and blasphemy to which mesmerism legitimately tends.

New York, October 12, 1846.

AN OLD SUBSCRIBER.

THE LATE DR. S. B. FULLER, OF HARTFORD.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—I take the liberty to furnish you with a brief obituary notice of the late Samuel B. Fuller, M.D., of Hartford, who died on the 17th of Sept. last, after a few weeks sickness with phthisis pulmonalis, aged 34 years.

Dr. Fuller was the youngest son of Silas Fuller, M.D. of this city, so well known throughout the State as one of our most eminent physicians and surgeons. The deceased graduated at the Medical School of New Haven in the winter of 1842, and soon commenced the duties of his profession with prospects fair for usefulness and success. But the prospect which was then so fair and unclouded to him, and big with hopes of the future, became suddenly and sadly changed, and the sun of his life early sunk to rest. Dr. F. was highly esteemed, not only by his professional brethren, but by all who had the pleasure of his acquaintance; he was possessed of fine feelings, and of an amiable and mild disposition. He lived a christian, and he died sustained by the christian's hope—which hope is the promise of the *resurrection from the dead*. His wife and three little children, whom he left to mourn his loss, have the sympathies of many friends.

DAVID CRARY, M.D.

Hartford, Ct., Oct. 12, 1846.

 THE BOSTON MEDICAL AND SURGICAL JOURNAL.

 BOSTON, OCTOBER 21, 1846.

Tedious Narrations of Patients.—One of the annoyances connected with the practice of medicine, with which all physicians are familiar, but which few have the moral courage to resist, is the disposition, if not the determination, of patients of certain orders, to recite, with tedious minuteness, not only all the aches and twinges that they have felt, but their opinions in regard to the causes, and, also, their views of the method of treatment. This is scarcely to be endured, by the best bred men in the profession, through one half the story. No one at all conversant with every-day practice, escapes this abominable evil, which increases with the years of those who have contracted this habit of boring their medical attendant. A gentleman of great medical distinction, in this city, was consulted by a woman, a year or two since, who kept up such an unceasing gabble about her symptoms, the vast amount of money she had paid for advice, the celebrated men who had examined her case, together with her own conception of the true nature of her complaints, that the quiet doctor, who had tried repeatedly to get a word in, raised his hands in despair, and exclaimed, "Madam, there is one disease of which you never can be cured." "Pray what is that, sir?" she eagerly asked. "An everlasting motion of your tongue," said he, and left her to meditate on her own condition, which she professed to understand better than any one else.

This habit generally results from an imperfect knowledge of the true principles of politeness, together with an over-activity of those cerebral departments where phrenologists suppose vanity is elaborated. It is to be lamented that the usages of society oblige physicians to listen to long, uninteresting descriptions of feelings, minute statements respecting the day of the week and the hour when a pill was taken, the direction of the wind, &c. &c., because it gives him little or no correct knowledge of the case, and it draws largely upon his time, which is always precious, but particularly so to a general practitioner in the country, whose rides are often fatiguing, frequently solitary, and, worst of all, often unprofitable.

If there is a remedy for this acknowledged evil, the only hope of relief must be found in resolutely impressing it upon the minds of over-talkative patients, that a personal examination of the case, with such explanations as are necessary, and no more, on their part, is enough. To be respected, we must command respect by courteous manners, and by never allowing ourselves, in our intercourse with the sick, to be guilty of the same weakness that we condemn in them.

Adulteration of Medicines.—"There are tricks in all trades but ours," according to the proverb; but if we were disposed to believe this was true in regard to dealers in medicine, we should do so no longer after reading a treatise on the adulterations of the various substances used in medicine and the arts, which has lately come under our notice. We were not be-

fore aware of the extent of the iniquity practised by the dealers and manufacturers. Dr. Lewis C. Beck, Professor of Chemistry in the Albany Medical College, is the author of the work, which is just from the press, and is entitled "Adulterations of the various substances used in medicine and the arts, with the means of detecting them; intended as a manual for the physician, the apothecary and the artisan." All the arts and devices of unprincipled men who cheat in drugs, are minutely exposed. If, after this, any one buys a poor article, we can say to him as the printers do to those who are taken in by an often-described counterfeit bank bill, "you might have known better."

In some parts of the world we are compelled to believe that cheating is a regular business, and that a branch of the trade consists in adulterating medicine; but here in the United States, apothecaries, within the range of our acquaintance at least, are honest men. "Evil communications," however, "corrupt good manners," and the art of mixing Indian meal with pulverized rhubarb, starch with the sulphate of quinine, &c., may possibly by and by be a common affair even here. To adulterate arsenic, ergot, and even cayenne pepper, with saw dust, shows that the demand for these articles is active, and the profit is of course great. Many a life may have been lost in consequence of the inertness of medicines prescribed with high hopes and expectations of relief. This book, therefore, is a desirable assistant, like the counterfeit detector at the banks, not only in putting us on our guard, but showing the exact chemical process for detecting frauds in drugs, oils, and most of the chemical compositions used in the modern arts. Dr. Beck has laid us all under great obligations by this timely, warning volume.

Chemistry of the Four Seasons.—This is a delightful publication. The author is Thomas Griffiths, Professor of Chemistry in the Medical College of St. Bartholomew's Hospital. It is a parlor, a window, or a library book, and, open where we may, there is something to interest and instruct us. The chemistry of spring considers the germination of seeds, the changes of their proximate principles, induced through the agencies of earth, air, water and heat. Following this beginning, all the phenomena of growth in the vegetable kingdom, and the vast variety of changes that take place in every stage of vegetable existence, are explained. The chemistry of summer is a continuation of the same series of subjects, together with curious observations on the influence of heat, the density of the atmosphere, temperature, evaporation of water, &c. &c. Autumn, with her golden harvests, is rich in materials for the philosopher. Here, the doctrine of marsh miasm, malaria, the nature of infectious matter, &c., are investigated. Lastly, winter, with all its chills, its dreary associations and discomforts, is made charming under the minute inspection of Mr. Griffiths. The transition of water into ice, petrifying springs, the formation of snow flakes, nature's mode of preserving aquatic animals in ice, the formation of frost and icicles, the clothing of quadrupeds, latent heat, &c., are among the multitude of topics discussed in this division of the volume. As a whole, all persons of taste, refinement of moral sentiment, or religious feeling, will dwell with enthusiasm on the facts and arguments adduced by Mr. G. A leading object with the author is to illustrate passages of Scripture. As the end of all science is to explain to our com-

prehension the permanent laws of God, this book is a treasure. Copies of this, and of Dr. Beck's work, are on sale at Ticknor & Co.'s, Washington street.

Hartford (Conn.) Medical Society Regulations.—Through Dr. Crary, of Hartford, the Journal has been furnished with a copy of the rules of government of the Hartford Medical Society, to which a fee table is appended. The gentlemen associated have strongly fortified themselves against all misunderstanding; but if any difficulties hereafter should occur to mar their social intercourse, an appeal to the system of government they have adopted, must be the most satisfactory mode of settling them. The tariff of charges is moderate—quite as much so as it ought to be in a city, where the personal expenses of a physician must necessarily be more than in the interior of the country.

Prof. Agassiz.—Naturalists must all be familiar with the reputation of Prof. Agassiz, of Neuchâtel, who has distinguished himself in geological researches, and especially by the light he has thrown on fossil fishes. Some of the published works of this gentleman are very splendid productions. Prof. Agassiz, we understand, was educated a physician, but for the last fifteen years has devoted himself exclusively and passionately to the cultivation of natural history and geology. He has already been engaged to deliver one of the courses of lectures before the Lowell Institute, in this city. As he proposes to remain about two years in this country, he will probably visit, before returning home, whatever is most interesting to a learned European in the United States.

Mortality in Montreal.—By the bill of mortality for the city of Montreal, published in the British American Medical Journal, it appears that the destruction of life among infants has been great there the past summer, as well as in other places. During the month of August, the whole number of deaths was 202, of which 125 were children under 5 years of age. A different nomenclature seems to be in use there, from the one we are accustomed to, or else diseases are differently manifested, as 34 deaths under 3 years are reported as from *consumption*.

Election of Medical Professors by Concours.—The mode of electing important medical officers by *concours*, or a public examination of candidates, which is in vogue in Paris, and which has given occasion there for some of the most brilliant displays of medical erudition, as well as self-collection and ready skill in public disputation, is to be adopted at the School of Medicine and Surgery in Montreal, in the choice of lecturers to fill the chairs of Institutes of Medicine, Medical Jurisprudence and Botany, which is to take place on the 29th of November; and also in the choice of second Demonstrator of Anatomy, on the 30th of November. The candidates must understand the French and English languages.

Mortality in St. Louis during 1845.—Dr. Victor J. Fourgeaud, in the September No. of the St. Louis Medical and Surgical Journal, states that the total amount of mortality in that city for the year 1845 was 1694, of

which 945 were children under 7 years of age, and 749 was the number of deaths comprising all persons over 7. The mortality among children under 7 surpassed that of all persons over that age by 196; and it exceeded that of all persons over that age for every month except those of April, November and December.

The month of September was the most fatal, the deaths amounting to 254, of which more than one half were children. The month of February was the most favorable, only 60 deaths having occurred.

The total amount of deaths for 1845 exceeds that of 1844 by 109, but if we consider the rapid increase of population, we will not be far from truth in putting down the ratio of mortality for 1845 about the same as for 1844, viz., 1 in 23.

The months of June and September were the most unfavorable to children, 147 having died in the former, and 128 in the latter. The months of April and November were the most favorable, 36 deaths having occurred in the former and 38 in the latter. The following diseases were the causes of death in a majority of cases:

Cholera infantum, 166; dentition, 133; inflammation of the lungs and appendices, 62; consumption and marasmus, 58; convulsions, 54; enteritis, 44; inflammation and congestion of the brain, 35; hydrocephalus, 35. There were 63 stillborn and premature births terminating fatally.

Three thousand one hundred and fifty-five children under 7 years of age died in St. Louis, during the last five years. The whole number of deaths for the same period being 6,011, of which 2,856 were persons over 7 years of age, it follows that the mortality among children exceeded that of all persons over 7 by 299.

Protracted Gestation.—In the 15th No. of the last volume of this Journal a case was referred to, in which, in a trial for fornication and bastardy, in Lancaster, Penn., it was decided by Judge Lewis that a pregnancy of three hundred and thirteen days, which it was necessary, for the conviction of the defendant, to acknowledge had occurred in the person of the prosecutrix, was possible, and the jury accordingly convicted him. Some further account of the case is given in the last No. of the American Journal of Medical Sciences, from which it appears that medical witnesses were called both for the defence (which was the impossibility of so long a period of gestation) and the prosecution. Dr. J. L. Atlee, for the prosecution, related two cases in his own practice in which, he said, the patients must have gone at least ten calendar months; and a lady of respectability testified on the trial that in the case of her seventh child the period of gestation was over ten months, and seven months after quickening. The Judge, in his charge, argued mainly from analogy. We think his reasoning exceedingly specious, however, when he attempts to find an analogy for such protracted gestation in instances in which human life extends beyond "three score years and ten." The following is part of his charge:

"The heads of wheat in the same field do not all ripen together. The ears of corn on the same stock do not all come to maturity at the same time. Even the grains of corn on the same ear ripen at different periods. The fruit on the same tree shows the like deviation. A portion will ripen and fall while other portions remain comparatively

green upon the parent stalk. The eggs of the fowl, under process of incubation at the same time, are subject to the same variation. In quadrupeds, if the testimony of M. Tessier be believed, we have proof of the like irregularity. Whatever may be the causes, operating in each case, to divert nature from her accustomed course, to accelerate or delay her usual progress, the human species, like the rest of creation, seems occasionally under their influences. The developments of puberty, although generally shown at a certain age, are far from regular. Some individuals approach it earlier—others later in life. Intellectual maturity is subject to the same irregularities. Some are precocious, others astonishingly tardy in arriving at the usual degree of discretion. The intervals between the catamenial visits, although in general regular and fixed, exhibit remarkable deviations. The final departure of the catamenia, although generally to be expected at a certain age, is as irregular as their first approach, and as subject to variation as were their periodical returns. A certain period of life has been usually assigned for the termination of a mother's perils, but the instances of extensive deviations from this general rule are numerous and well-established. The gestation of one child at a time is according to the course of nature, but the births of twins, triplets, &c., furnish indubitable proofs of astonishing departures from the usual course. The sensations of the mother produced by the elevation of the fœtus from the cavity of the pelvis (called quickening), although usually occurring at a certain period, are known to be subject to the like departure from the usual time. It has been said that human life does not generally extend beyond 70 years. But if this be the general rule, the departures are numerous. The most distinguished jurist, perhaps, now living in the whole world (Chancellor Kent), will be 83 years old on the 31st of July next; and yet, within a few days I have been honored by the receipt of a letter from him, under date of the 18th inst., in which he states that he is still in "good and active health—that his relish and ardor for studies and legal learning continue unabated—that he has the blessing of good eyes, and that he is still an observer of what passes with lively sensibility." This instance may serve to illustrate not only the occasional deviation from general rules respecting the duration of human life, but the like variation in respect to intellectual vigor, by which one individual attains a pre-eminence over the generality of mankind. All nature abounds with occasional departures from her general customs. Even the compass, which guides the mariner on the trackless ocean—which enables science to fix with reasonable certainty the boundaries of kingdoms and farms, and the truthfulness of which to its accustomed law has been perpetuated by a proverb—is subject to mysterious but acknowledged variations."

Death of a Physician by the accidental Use of Strychnine.—The Vermont Watchman, published at Montpelier, announces the very sudden death, at that place, on Sunday morning, October 12th, of Dr. William Cullen Warner, representative of the town of Bristol, aged 42 years. By a grievous mistake, Dr. Warner took a large dose of strychnine, which, in spite of the immediate services of a physician, resulted in death in the space of ten minutes. The members and officers of both Houses, the officers of the State and National governments, present in town, and the

citizens generally, expressed their respect for the deceased, by uniting in the funeral services. Dr. Warner doubtless intended to take a moderate dose of morphine, for the relief of neuralgia, but he unfortunately substituted a dose of one of the most virulent poisons known.

Means of Preventing Bed Sores.—Dr. T. Purefoy has employed partially inflated bladders with success as a support to parts long and unduly subjected to pressure. The bladder is to be previously moistened in tepid water, afterwards oiled, and subsequently partially inflated. He has found this means to promote the comfort of the patient and to obviate sloughing of the integuments.—*Dublin Med. Press.*

Medical Miscellany.—Cholera morbus is spoken of as being quite fatal in the eastern part of New Hampshire.—J. Scudder, M.D., in the missionary service, is expected to sail for India early next month, with his family.—At San Antonio, Dr. Hope, of the Illinois volunteers, and Dr. Price, of the same body, fought a duel, but no harm resulted.—The cholera is still raging at Teheran—two of the Shah's sons have died with it. Such is the alarm that the Court of Persia has probably abandoned the capital of the kingdom by this time, unless the disease has abated.—Much sickness prevails at the Navy Yard at Pensacola.—Dr. Luther, a dentist, of Boston, is the inventor of a new tooth wash and dentifrice, which is much applauded by those who know the composition.—A Dr. Thomas has been engaged in a duel at New Orleans, and was severely wounded in the thigh by his antagonist's sword—A great hydropathic establishment is to be constructed at Northampton, Mass., to be placed under the care of Dr. E. E. Denniston.—Dr. C. H. Stedman has been re-elected Physician and Superintendent of the Boston Lunatic Asylum.—Strange stories are related in the papers of a wonderful preparation, in this city, by administering which, a patient is affected just long enough, and just powerfully enough, to undergo a surgical operation without pain.—Mr. C. H. Cole died at Exeter, England, recently, from the effects of a sixpence which he had accidentally swallowed eight years before. An examination of the body was made, and the coin found lodged in the right bronchia, the lung being in a state of complete gangrene.—A lady, 90 years of age, residing at Cold Spring, has recently cut four front teeth—being the third set—and her eyesight has so far returned that she can see without glasses.

MARRIED.—In Boston, Dr. George H. Lyman to Miss Maria C. R. Austin.—Dr. Moses P. Greenleaf, of West Newton, Mass., to Miss S. A. Allen.—At Blandford, Mass., Edward W. Hatch, M.D., of Caldwell, New Jersey, to Miss Nancy Boies, of the former place.—At New York, L. Bugbee, M.D., of Bristol, R. I., to Miss J. T. Hazard.—At New Orleans, Dr. George M. Saunders to Mrs. Harriet L. Kent, of Middletown, Conn.

DIED.—At Lyme, Conn., after a lingering illness, Dr. John C. M. Brockway, aged 62.—At Granville, Ill., Dr. John Church, formerly of Amherst, Mass., 65.

Report of Deaths in Boston—for the week ending Oct. 17th, 43.—Males, 23, females, 20 Stillborn, 7. Of consumption, 7—disease of the heart, 1—jaundice, 1—marasmus, 2—intemperance, 1—scarlet fever, 1—pleurisy fever, 2—typhus fever, 3—diabetes, 1—hemorrhage of the lungs, 1—cholera infantum, 1—dysentery, 4—diarrhoea, 2—accidental, 1—inflammation of the bowels, 3—old age, 2—tumor, 1—dropsy, 1—infantile, 1—dropsy of the brain, 3—child-bed, 1—teething, 2—unknown, 1.

Under 5 years, 14—between 5 and 20 years, 5—between 20 and 40 years, 13—between 40 and 60 years, 7—over 60 years, 4.

New Researches on the Movements of the Heart.—Most physiologists are agreed that the impulse of the apex of the heart against the thoracic parietes corresponds with its systole. The contrary opinion has, however, been maintained by several eminent writers, both in this country and in France. Signor Gola's researches were undertaken with the view of ascertaining to what movement of the heart the impulse of the apex against the thoracic parietes corresponded. Having with much care exposed the heart of a frog, he found that the contractions of the heart were accomplished in the following order:—

"The systole of the auricle preceded the diastole of the ventricle; in its dilatation the ventricle increased at its base by three lines in diameter. In proportion as the ventricle became distended, the surface became flattened on its greatest diameter, and the whole heart executed a slight movement of rotation from right to left, in consequence of the dilatation being greatest towards the right side of its base. By virtue of this rotary movement, the point moved about a line towards the left side, but was not sensibly elevated.

"To the diastole succeeded the systole of the ventricle, and during it the transverse diameter of the ventricle, at its base, diminished by three lines; but this part of the heart gained in height what it lost in breadth and extent; it took a lengthened form, and the apex was elevated from its plane and sensibly carried forwards.

"When a fine straw, fixed at its two extremities, was laid across the heart, so that during the diastole it simply touched the surface, it was sensibly raised during the systole. By placing this straw longitudinally to the axis of the heart, and allowing one end to move over a graduated scale, he found that while during the diastole the straw was only raised to the extent of one tenth part of a centimetre, during the systole it was raised eleven and half tenth parts of a centimetre.

"These and other experiments led Signor Gola to conclude that the impulse of the apex against the ribs and the contraction of the auricles coincided. In conclusion, he remarks, that he has often introduced his hand into the pericardium of animals while being slaughtered for food, and invariably remarked that the heart, during its contraction, struck with force against the hand, and the impulse was sometimes so strong as to cause a disagreeable sensation."—*Edin. Med. and Surg. Jour.*

Importance of Good Diet to Insane Patients.—Before the French Revolution, the diet at the Bicêtre consisted, Pinel says, of a pound and a half of bread daily. This was given out in the morning, and instantly devoured, the rest of the day being passed in a kind of delirious famine; as travellers now report it to be by the patients in the cages of the asylum at Cairo. In 1791, the diet at the Bicêtre was amended, the allowance of bread being increased to two pounds, which was directed to be given in divided portions, with some good soup, morning, noon and evening. The results of these changes are worthy of remembrance by the directors and officers of public institutions, who are sometimes led into inhumanity, disguised as the respectable virtue of economy. Under the old system, in 1784, out of 110 admissions there were 57 deaths. After the introduction of the new system, the mortality on the total number admitted was reduced to one-eighth.—*London Lancet.*